

CITY OF ST. LOUIS WATER DIVISION APPLICATION FOR WATER WAGON

WORK ORDER # _____

EVENT: _____

DATE: _____

LOCATION: _____

TIME & DATE TO INSTALL: _____

TIME & DATE TO PICK UP: _____

**DEPOSIT \$400.00 (\$50.00 TO DELIVER AND \$50.00 TO PICK UP)
BALANCE WILL BE REIMBURSED UNLESS STOLEN OR DAMAGED**

TOTAL DEPOSIT \$ _____ **CHECK OR M.O. #:** _____

NAME OF PERMIT HOLDER: _____

ADDRESS: _____

CITY _____ **STATE** _____ **ZIP** _____

PHONE NUMBER _____ **FAX NUMBER** _____

AUTHORIZED AGENT'S SIGNATURE _____

PRINTED _____

**DRIVER'S LICENSE
NUMBER** _____ **STATE** _____ **EXP DATE** _____

APPROVED BY: _____ **ISSUED BY:** _____

DATE: _____

White - Pipeyard

Pink - Distribution

Green - Customer

Yellow - Kingshighway

415-59 (ML 4/16)

